ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W. A		11/26/01
O.I.P.E. CLASSIFIER		48	12/1/01
FORMALITY REVIEW	CTH	744	11-34-01
RESPONSE FORMALITY REVIEW	lu	1016	01. 03 02

INDEX OF CLAIMS

✔	.... Rejected	N .... Non-elected
=	.... Allowed	I .... Interference
—	(Through numeral)... Canceled	A .... Appeal
÷	.... Restricted	O .... Objected

Claim		Date
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Claim		Date
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Claim		Date
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If more than 150 claims or 10 actions
staple additional sheet here

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